



Claim form for Housing Benefit and Council Tax Support

This form was sent to

Date issued:

This box is for our use only

This box is for our use only.				
Claim number				
DMS code				
Proof checklist	Have we received and checked the proof?		Have we asked for more proof?	
	Yes	No	Yes	No
Identity				
Residency				
Rent details				
Household				
Earnings				
Self-employed earnings				
Benefits				
Capital				
Other income				

Are you:

making a new claim?

☐

telling us about a change in your circumstances?

☐

How to fill in this form

- Please fill in this form using black ink. On pages 19 and 20 there are notes to help you. Please read these carefully.
- Please answer all the questions on the form. If any does not apply to you, write 'None' or 'does not apply'.
- If you do not fill this form in properly it will take us longer to deal with your claim.
- You must return this form to us immediately, even if you do not have all the proof we have asked for. If you delay sending the form to us, you could lose benefit. You must send us any proof that was missing within one month. If you don't, we will cancel your claim.
- We can only accept **original** documents as proof. We cannot accept any photocopies.
- Please make sure that you (and your partner, if you have one) sign the declaration on page 17.
- When you have filled in this form, please return it to us. Do not send valuable documents such as passports in the post.
- You can bring your claim form and documents to our offices at either Portland House or The Shoreham Centre. We will copy your original documents while you wait and then give you back the originals.
- The address to return your form to is shown at the top of this page

How we collect and use information



We must protect the public funds we handle, so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds and we will use the information to make sure that we charge you the correct Council Tax and Business Rates. Use of your personal data will be in accordance with Data Protection legislation. Full details about how your personal data is used are available at www.adur-worthing.gov.uk/benefits/privacy-notice.

Are you:

a private tenant? ☐ living in a hostel? ☐
 an Adur Homes tenant? ☐ a boarder? ☐
 a Worthing Homes tenant? ☐ homeless? ☐
 a tenant of another housing association? ☐ an owner-occupier? ☐

If you are getting Income Support, income-based Jobseeker's Allowance or income-related Employment and Support Allowance, please tick this box. ☐

If you have recently moved within Adur or Worthing, please tick this box ☐

1. You and your partner

If you do not have a partner tick this box ☐

A partner is someone you live with who:

- you are married to or have a civil partnership with; or
- you are living with as if you were married or in a civil partnership with them.

Do you have a partner? Yes ☐ No ☐

If yes, give their details as well as your own.

You

Surname:

Other names:

Title: Mr ☐ Mrs ☐ Ms ☐ Miss ☐

Other

National Insurance number:

Date of birth:

Any other names you use or are known by:

Address and postcode your claim is for:

E-mail address:

Phone:

What date did you move, or will you move, into this address?

Do you own this property or have you owned it in the past? Yes ☐ No ☐

Are you a joint owner or joint tenant? Yes ☐ No ☐

If 'yes', who with?

What is your nationality?

Have you lived in the UK for all of the last five years? Yes ☐ No ☐

If 'no',

• Give the date you arrived in the UK.

(We may need to write to you for more details.)

• Are you entitled to state benefits in the UK?

(See the entry conditions in your passport.)

Yes ☐ No ☐

Your partner

Surname:

Other names:

Title: Mr ☐ Mrs ☐ Ms ☐ Miss ☐

Other

National Insurance number:

Date of birth:

Any other names you use or are known by:

Address and postcode your claim is for:

E-mail address:

Phone:

What date did you move, or will you move, into this address?

Do you own this property or have you owned it in the past? Yes ☐ No ☐

Are you a joint owner or joint tenant? Yes ☐ No ☐

If 'yes', who with?

What is your nationality?

Have you lived in the UK for all of the last five years? Yes ☐ No ☐

If 'no',

• Give the date you arrived in the UK.

(We may need to write to you for more details.)

• Are you entitled to state benefits in the UK?

(See the entry conditions in your passport.)

Yes ☐ No ☐

1. You and your partner (continued)

You

What was your last address?

The date you left this address:

	/		/	
--	---	--	---	--

Did you own this property?

Yes ☐ No ☐

Did you rent this property?

Yes ☐ No ☐

Were you living with relatives at this address?

Yes ☐ No ☐

Have you made a claim for Housing Benefit or Council Tax Support in the last fifty-two weeks?

Yes ☐ No ☐

If 'yes', have you ever been in the care of social services?

Yes ☐ No ☐

If 'yes', have you had support from social services since your 16th birthday?

Yes ☐ No ☐

If 'yes':

• when did the support stop?

	/		/	
--	---	--	---	--

• which office did you deal with?

Have you been unable to work for more than 52 weeks because of ill health?

Yes ☐ No ☐

Are you registered blind?

Yes ☐ No ☐

If 'yes', give your registration number.

--

Does anyone get Carer's Allowance for looking after you?

Yes ☐ No ☐

If 'yes', who gets it?

--

Do you get a disability premium or allowance in any benefits or tax credits?

Yes ☐ No ☐

Your partner

What was your last address?

The date you left this address:

	/		/	
--	---	--	---	--

Did you own this property?

Yes ☐ No ☐

Did you rent this property?

Yes ☐ No ☐

Were you living with relatives at this address?

Yes ☐ No ☐

Have you made a claim for Housing Benefit or Council Tax Support in the last fifty-two weeks?

Yes ☐ No ☐

If 'yes', have you ever been in the care of social services?

Yes ☐ No ☐

If 'yes', have you had support from social services since your 16th birthday?

Yes ☐ No ☐

If 'yes':

• when did the support stop?

	/		/	
--	---	--	---	--

• which office did you deal with?

Have you been unable to work for more than 52 weeks because of ill health?

Yes ☐ No ☐

Are you registered blind?

Yes ☐ No ☐

If 'yes', give your registration number.

--

Does anyone get Carer's Allowance for looking after you?

Yes ☐ No ☐

If 'yes', who gets it?

--

Do you get a disability premium or allowance in any benefits or tax credits?

Yes ☐ No ☐

Please send two original documents as proof of your (and your partner's) identity and National Insurance number. See the 'checklist' on page 16 for examples of the documents you could send us.
You only need to send proof for new claims.
Remember – you must send original documents.
We cannot accept photocopies.

2. Children who live with you

Do any children who you get Child benefit for live with you? Yes ☐ fill in this section. No ☐ go to section 3.
If there are more than three children, use an extra sheet of paper to tell us about them. If you have other children who live with you, but who you don't get Child Benefit for, give their details in section 3.

	First child	Second child	Third child
Surname:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth:	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
What is their relationship to you?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they male or female?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they registered blind?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they receive Disability Living Allowance or a Personal Independence Payment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', do they have their own bedroom?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they go to a registered nursery, childminder or playscheme?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', give the name and address of the childminder, nursery or playscheme.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	What is their Ofsted registration number?	What is their Ofsted registration number?	What is their Ofsted registration number?
	<input type="text"/>	<input type="text"/>	<input type="text"/>
When do you pay childcare fees?			
Term time only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Term time and school holidays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School holidays only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount you pay	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Every:			
day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For each child, please send original proof of Child Benefit, any childcare costs, Disability Living Allowance, Personal Independence Payment, or their blind registration document (if appropriate).

Remember – you must send proof to avoid delays in assessing your claim.

We cannot accept photocopies.

3. Other people who live in your home

Apart from your partner and the children listed in section 2, does anyone else live in your home?

Yes ☐ Fill in this section

No ☐ Go to section 4

In this section, give details of other people who live with you. Include grown-up children you no longer get Child Benefit for, friends, relatives, lodgers, subtenants, and joint tenants. These people are often referred to as non-dependants. If there are more than 3 non-dependants, give details on a separate sheet.

	First person	Second person	Third person
Surname:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth:	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
National Insurance number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date they moved in:	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is their relationship to you?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they a joint tenant or joint owner with you? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
(Go to section 4 if you only have joint tenants living with you.)			
Do they pay you any rent? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', how much and how often? £ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
Does their rent include payment for meals? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does their rent include payment for heating and hot water? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they receive Income Support, income-based Jobseeker's Allowance or Income-based Employment Support Allowance? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they get any other state benefits? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', which ones and how much each week? £ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
(Use an extra sheet of paper if necessary.)			
Do they work? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', how many hours a week? <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
What date did they start work? <input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What are their earnings before tax, National Insurance, pension contributions and so on? £ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
Do they have any other income? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', please give details, including the amount. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they get Disability Living Allowance, a Personal Independence Payment or Attendance Allowance? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', how much do they get each week? £ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Do they provide more than 35 hours' care a week for someone in your home? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are they severely mentally impaired? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'yes', who do they provide the care for? <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
What is their relationship to the person they care for? <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they a student? (Provide proof of their course.) Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

3. Other people who live in your home (continued)

First person

Are they in prison or in hospital?

Yes ☐ No ☐

If 'yes', give the date they went into prison or hospital.

____/____/____

Are any of the people married or civil partners, or living together as if they were married or civil partners?

Yes ☐ No ☐

If 'yes', please say who.

is the partner of
is the partner of

Second person

Yes ☐ No ☐

____/____/____

Yes ☐ No ☐

Third person

Yes ☐ No ☐

____/____/____

Yes ☐ No ☐

**For each person, please send original proof of all of their income or benefits. We cannot accept photocopies.
Remember – you must send proof to avoid delays in assessing your claim.**

4. Earnings

If you are only claiming Second Adult Rebate, go to section 13.
(See the notes on page 19 for an explanation of Second Adult Rebate.)

You

Are you in paid work, including as a director or secretary of a company?

Yes ☐ Please give details below.

No ☐ Go to section 5.

Employer's name and address:

Your employee or payroll number shown on your payslip:

What is your job title?

Date you started this job

____/____/____

Is your job seasonal or temporary? Yes ☐ No ☐

If 'yes', when will it end?

____/____/____

How many hours do you work each week?

How much are you paid after tax, National Insurance, pension contributions and so on? £

How often are you paid?

(for example, every week, every four weeks, every month)

How are you paid?

(Cash, cheque, direct into bank and so on)

Do you regularly work overtime? Yes ☐

No ☐

Do you receive bonus, tips or commission?

Yes ☐

No ☐

If 'yes', what is the average amount each week?

£

Your partner

Are you in paid work, including as a director or secretary of a company?

Yes ☐ Please give details below.

No ☐ Go to section 5.

Employer's name and address:

Your employee or payroll number shown on your payslip:

What is your job title?

Date you started this job

____/____/____

Is your job seasonal or temporary? Yes ☐ No ☐

If 'yes', when will it end?

____/____/____

How many hours do you work each week?

How much are you paid after tax, National Insurance, pension contributions and so on? £

How often are you paid?

(for example, every week, every four weeks, every month)

How are you paid?

(Cash, cheque, direct into bank and so on)

Do you regularly work overtime? Yes ☐

No ☐

Do you receive bonus, tips or commission?

Yes ☐

No ☐

If 'yes', what is the average amount each week?

£

4. Earnings (continued)

You

What date is your next pay rise? / /

Do you pay into a pension scheme? Yes ☐ No ☐

If 'yes', is it: through your company? ☐ private? ☐

Do you have more than one job? Yes ☐ No ☐

If 'yes', give details of the other employer, the hours you work and how much you earn.

Your partner

What date is your next pay rise? / /

Do you pay into a pension scheme? Yes ☐ No ☐

If 'yes', is it: through your company? ☐ private? ☐

Do you have more than one job? Yes ☐ No ☐

If 'yes', give details of the other employer, the hours you work and how much you earn.

For each job that you and your partner have, you must send original proof of earnings. Please provide your last five payslips if you are paid every week, your last three payslips if you are paid every fortnight, or your last two payslips if you are paid every month or four weeks. If you can't supply payslips, ask your employer to fill in the certificate of earnings at the back of this form. Remember – you must send proof to avoid delays in assessing your claim. We cannot accept photocopies.

5. Self-employed earnings

Are you or your partner self-employed (if you are a company director, please complete section 4)?

Yes ☐ Fill in this section. We may need to write to you for more information.

No ☐ Go to section 6.

You

The name of your business:

--

Registered address of your business:

Business phone number:

What type of business do you run?

--

When did you start trading? / /

When does your financial year start?

Your current estimated profit each week? £

How many hours do you work each week?

Are you a partner in the business? Yes ☐ No ☐

Do you pay into a pension scheme? Yes ☐ No ☐

Your partner

The name of your business:

--

Registered address of your business:

Business phone number:

What type of business do you run?

--

When did you start trading? / /

When does your financial year start?

Your current estimated profit each week? £

How many hours do you work each week?

Are you a partner in the business? Yes ☐ No ☐

Do you pay into a pension scheme? Yes ☐ No ☐

--

6. Students

Are you or your partner students? Yes ☐ Fill in this section.

No ☐ Go to section 7.

You

How many hours do you study each week?

Name of your college or university:

Address of your college or university:

Title of course:

Length of course:

Which year of study are you in? 1st ☐ 2nd ☐ 3rd ☐ 4th ☐

Dates of terms: Autumn / / to / /

Spring / / to / /

Summer / / to / /

Do you receive a grant? Yes ☐ No ☐

If 'yes', how much and how often? £ every

Amount of student loan: £

Do you receive sponsorship? Yes ☐ No ☐

Do you receive a covenant? Yes ☐ No ☐

Do you receive money from your parents? Yes ☐ No ☐

Do you have any other income? Yes ☐ No ☐

If 'yes', please give details

Your partner

How many hours do you study each week?

Name of your college or university:

Address of your college or university:

Title of course:

Length of course:

Which year of study are you in? 1st ☐ 2nd ☐ 3rd ☐ 4th ☐

Dates of terms: Autumn / / to / /

Spring / / to / /

Summer / / to / /

Do you receive a grant? Yes ☐ No ☐

If 'yes', how much and how often? £ every

Amount of student loan: £

Do you receive sponsorship? Yes ☐ No ☐

Do you receive a covenant? Yes ☐ No ☐

Do you receive money from your parents? Yes ☐ No ☐

Do you have any other income? Yes ☐ No ☐

If 'yes', please give details

You must send original proof for you and your partner. Please supply your grant notification (if you get a grant), your financial assessment letter, details of all student loans and evidence of any covenant, sponsorship or parental contributions you get. We will also need to see your student certificate to confirm whether your course is full or part time.

Remember – you must send proof to avoid delays in assessing your claim.

We cannot accept photocopies.

7. Other income

Please answer all the questions in this section. If you do not receive a particular pension, benefit or allowance, write 'none' in the box next to it.

Have you or your partner recently applied for any benefits or income but have not yet received payment?

Yes ☐ No ☐

If 'yes', tell us which benefits or income.

What date did you claim it?

	/		/	
--	---	--	---	--

For pensions, benefits or allowances you receive, write the amount you get before any deductions, and how often it is paid. (You do not need to declare any payments from The Eileen Trust, Independent Living Fund or the MacFarlane Trust.)

	You		Your partner	
	How much do you get?	How often is it paid?	How much do you get?	How often is it paid?
Pensions				
State Pension	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Private pension or pension from a former employer	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Widow's Allowance	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Widowed Mother's Allowance or Widow's Pension	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
War Widow's or War Dependant's Pension	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
War Disablement Pension	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Armed Forces Compensation Scheme	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Pension Credit (Guarantee Credit)	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Pension Credit (Savings Credit)	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Benefits and allowances				
Universal Credit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Income Support	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Jobseeker's Allowance (income based)	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Jobseeker's Allowance (contribution based)	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Employment and Support Allowance (income related)	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Employment and Support Allowance (contribution based)	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Child Benefit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Working Tax Credit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Child Tax Credit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Return to Work Credit / New Enterprise Allowance	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
In Work Credit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Short-term Incapacity Benefit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Long-term Incapacity Benefit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>

7. Other income (continued)

	You		Your partner	
	How much do you get?	How often is it paid?	How much do you get?	How often is it paid?
Attendance Allowance	£		£	
Disability Living Allowance: mobility component	£		£	
care component	£		£	
Personal Independence Payment	£		£	
Carer's Allowance	£		£	
Severe Disablement Allowance	£		£	
Industrial Injuries Benefit	£		£	
Maternity Allowance	£		£	
Fostering Allowance	£		£	
Guardian's Allowance	£		£	
Other income				
Statutory Sick Pay (paid by employer)	£		£	
Statutory Maternity Pay (paid by employer)	£		£	
Apprenticeship payments	£		£	
Maintenance you receive through the CSA/CMS, by court order or under a voluntary arrangement	£		£	
Payments from lodgers	£		£	
Weekly amount from letting or sub letting part of this property	£		£	
Income from life insurance policy	£		£	
Payments from a charity, or other voluntary payments	£		£	
Any other income or, If you currently have no income, how are you meeting your day-to-day living expenses (please give details)?				

Are you or your partner caring for anyone who gets Attendance Allowance **or** the care component of Disability Living Allowance **or** a Personal Independence Payment ?

Yes ☐ No ☐ Yes ☐ No ☐

Please supply original proof of all income you and your partner receive.
You can provide the latest award letter or a bank statement that shows the payment made to you.
Do not send payment books to us.
Remember – you must send proof to avoid delays in assessing your claim.
We cannot accept photocopies.

8. Cash, savings and investments

You need to tell us about **all** your bank accounts, building society accounts and post office accounts (even if they are overdrawn), and all other cash and investments. You must send current statements showing all payments into and out of the account over the last two months. We cannot accept mini statements.

If you have other accounts that there isn't space to tell us about below, give us details on an extra sheet of paper.

Do you or your partner have any bank or building society accounts? Yes ☐ Give details below No ☐

	Balance of account	In the name of
Name of bank or building society: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/> Name of joint account holders
Name of bank or building society: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/> Name of joint account holders
Name of bank or building society: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/> Name of joint account holders
Name of bank or building society: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/> Name of joint account holders
Name of bank or building society: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/> Name of joint account holders

Do you or your partner have any post office accounts? Yes ☐ Give details below No ☐

Type of account: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/>
Type of account: Account number:	£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/>

Do you or your partner have any Premium Bonds, National Savings Bonds, Income Bonds or National Savings Certificates?

Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'yes': Issue number:	Value: £
Yes <input type="checkbox"/> No <input type="checkbox"/>	If 'yes': Issue number:	Value: £

	Name of company and number	Value	
Stocks, shares or unit trusts		£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/>
Cash savings		£	You <input type="checkbox"/> Partner <input type="checkbox"/> Joint <input type="checkbox"/>

Do you or your partner have any other savings or investments, or money owing to you which you have not included in the lists above (such as PEPs, ISAs, personal loans). Yes ☐ No ☐

If 'yes', please give details below and let us see proof.

Do you or your partner, or any of your children, have any money or property held in a trust fund?

Yes ☐ No ☐

If 'yes', please give details below and let us see the trust documents.

8. Cash, savings and investments (continued)

Do you or your partner have any money outside the UK?

Yes ☐ No ☐

If 'yes', provide details.

Do you or your partner own any property or land other than the house that you live in?

Yes ☐ No ☐

If 'yes', provide details. We may need to ask you for more information.

9. Your tenancy

Do you pay rent to a private landlord, Adur Homes, Worthing Homes or another housing association?

Yes ☐ Fill in sections 9, 10, 11 and 12.

No ☐ Go to section 13.

When did your tenancy start at your current address?

 / /

Your landlord's name:

Your landlord's address:

Your landlord's phone number:

If the landlord has an agent who collects the rent, you also need to tell us the following.

The agent's name:

The agent's address:

The agent's phone number:

Are you, your partner, or your children related to the landlord or the landlord's partner?

Yes ☐ No ☐

Are you, your partner, or your children related to the agent?

Yes ☐ No ☐

If 'yes', who is related, and what is the relationship?

Do you have a tenancy agreement? Yes ☐ No ☐

If 'yes', how long is it for? months

What kind of tenancy is it?

Assured ☐ Shorthold ☐ Other ☐ (Please state) Don't know ☐

Has your rent been registered with the Rent Service as a fair rent? Yes ☐ No ☐ Don't know ☐

(If 'yes', send the registration form.)

If you are an Adur Homes tenant or a Worthing Homes tenant, we do not need to see proof of your rent. Otherwise, please send original proof of your tenancy. You should supply your tenancy agreement or a letter from your landlord stating your rent, any services that are included and the date you moved. We also need to see a rent book or rent receipts. If you only supply a rent book or receipts, we may have to write to you or your landlord for more details. If you can't supply your tenancy agreement or a letter from your landlord, please ask your landlord to fill in the 'landlord certificate' at the back of this form.

Remember – you must send proof to avoid delays in assessing your claim.

We cannot accept photocopies.

10. Your home

You should only fill in sections 10, 11 and 12 if you rent your home.

If you are an owner-occupier, please go to the declaration at section 13.

Which of the following best describes your home?

House☐

Maisonette☐

Bungalow☐

Converted flat☐

Flat over a shop☐

Purpose-built flat☐

Studio flat☐

Bedsit☐

Rooms in a house or hostel☐

Other☐

Give details

We may need to write to you.

Is the property you live in:

detached?☐

semi-detached?☐

terraced?☐

If you rent a room:
what is the room number?

Where is your room?

(Tick one box only.)

At the front of the property☐

In the centre of the property☐

At the back of the property☐

From the front of the building,
is it:

on the left?☐

in the centre?☐

on the right?☐

Do you share your room with
anyone? Yes☐ No☐

Does your landlord live in the property? Yes☐ No☐

Please tell us the number of each type of room in your home,
and who uses them

	How many in the whole house or flat	How many are used only by you and your family	How many do you share with other people
Living rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedsit rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
(please specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>

How many floors are there in the whole building?

Which floor is your home on?

2nd floor☐

1st floor☐

Ground floor☐

Basement☐

Other (please specify)

Is there central heating in your home? Yes☐ No☐

Do you have use of a garage? Yes☐ No☐

Is your accommodation: fully furnished?☐
partly furnished?☐
unfurnished?☐

Who is responsible for decorating the inside of your home?
You☐ Landlord☐ Other☐

Who is responsible for paying Council Tax at your address?
You☐ Landlord☐ Other☐

Have you or your partner owned the property within the last five years?
Yes☐ No☐

Have you or your partner had a tenancy for 21 years or more for the
property that ended within the last five years? Yes☐ No☐

If necessary, can we contact your landlord or agent to confirm the rent or other tenancy details? Yes☐ No☐

If 'no', why don't you want us to contact them?

11. Your rent

How much rent does your landlord charge you? £

How often? Every day ☐ Every week ☐ Every fortnight ☐
Every four weeks ☐ Every month ☐ Every three months ☐

Who do you pay the rent to?

Do you have any weeks rent is not charged for? Yes ☐ No ☐ When are they?

Are meals included in your rent? Yes ☐ No ☐

If 'yes', which ones? Breakfast ☐ Lunch ☐ Evening Meal ☐

Are you behind with your rent? Yes ☐ No ☐ If 'yes', by how much? £

Does the rent you pay include charges for any of the following? (If 'yes', tell us how much each week if you know.)

	Yes	No	Amount		Yes	No	Amount
Water rates	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Cleaning or lighting of shared areas	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Council Tax	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Porter or estate staff	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Heating	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Lift	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Hot water	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	General counselling and support	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Cooking facilities	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Cleaning rooms and windows	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Emergency alarm	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Laundry	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>				
Cleaning	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>				
Personal care	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>				

We may have to write to you or your landlord for more details.

12. Payment

Private tenants

If you are renting from a private landlord, we will pay your benefit direct to you unless you feel this may cause you difficulty. For more details phone 01273 263444 (Adur residents) or 01903 221062 (Worthing residents) or contact Citizens Advice.

Adur Homes tenants

If you are renting from Adur Homes we will pay your benefit straight into your rent account.

Housing Association tenants

If you are renting from a housing association, you can have payments sent to you or your landlord.

Do you want your Housing Benefit to be paid to you or your landlord? Me ☐ Landlord ☐

For your convenience and security we recommend that payment should be made directly into a bank or building society account. You can get advice about opening an account from any bank or building society, from Citizens Advice, or from West Sussex Credit Union.

Please give the details of the account that payments are to be sent to

Name of the bank or building society:

Branch:

Sort code:

Account holder's name:

Account number:

Roll number (building society accounts only):

Now fill in the checklist, read and sign the declaration on page 17 then return the form to us, along with your original proof documents. If you do not have all the proof we need, return the form anyway and let us see the proof later. If you delay, you may lose benefit.

Checklist

Make sure you have answered every question and enclosed original documents as proof of the following for you and your partner (if you have one).

Proof of National Insurance number (for new claims only) Provided ☐ To follow ☐ Does not apply ☐

For example, a P45 or a P60 from your last employer, your National Insurance card, a printed payslip, a letter from the Department for Work and Pensions or Jobcentre Plus, a letter from your tax office or HM Revenue & Customs, a pension slip from an occupational pension.

Proof of identity (for new claims only) Provided ☐ To follow ☐ Does not apply ☐

For example, an up-to-date driving licence, your passport, a paid gas, electricity or phone bill, a bank statement, a birth or marriage certificate, divorce papers, a medical card, a residence permit, a letter from the Home Office, a probation officer, a solicitor, or a social worker.

Proof of earnings Provided ☐ To follow ☐ Does not apply ☐

For example, payslips (as explained on page 8), a detailed letter from your employer, or a filled-in certificate of earnings from the end of this form.

Proof of self-employed earnings Provided ☐ To follow ☐ Does not apply ☐

Your most recent accounts, bank statements, or a 'proforma for self-employed earners' (ask us for this if you need one).

Proof of benefits, pensions or allowances Provided ☐ To follow ☐ Does not apply ☐

For example, current award letters from the Department for Work and Pensions or a pension provider.

Proof of any other income Provided ☐ To follow ☐ Does not apply ☐

Proof of savings and investments Provided ☐ To follow ☐ Does not apply ☐

Bank, building society and post office account statements or passbooks showing the last two months payments. For all other savings and investments, provide certificates or other documents.

Proof of rent Provided ☐ To follow ☐ Does not apply ☐

For example, a current tenancy agreement, a letter from your landlord or agent, or a recently updated rent book or card. The document needs to confirm your rent and any service charges you pay, the date you moved in, and whether you are a joint tenant. It also needs to be signed by you and your landlord.

Proof of income, savings and investments of people listed in section 3

Provided ☐ To follow ☐ Does not apply ☐

Proof of Child Benefit Provided ☐ To follow ☐ Does not apply ☐

We also need to see proof of the child's or children's date of birth if the evidence supplied does not include this.

Proof of payments to a registered childminder Provided ☐ To follow ☐ Does not apply ☐

Proof of payments to a pension scheme Provided ☐ To follow ☐ Does not apply ☐

(Not those you make through your employer - they will show on your payslips.)

Proof of student ID and course details Provided ☐ To follow ☐ Does not apply ☐

If you do not have all the proofs you need, do not delay in sending or bringing this form to our office, as you could lose benefit. You can bring missing evidence in later.

We cannot accept photocopies, but please do not send valuable documents through the post.

Our address is on the front of this form.

13. Declaration

**Please read the information on page 20,
then read and sign the declaration below.**

Please read the following declaration very carefully before you sign and date it. If you have a partner, he or she must also read and sign it. If you do not sign this declaration, we will have to send the form back to you and this will delay your claim.

We can prosecute you if you give false information, if you provide false proof, or if you do not provide relevant information (including information about a change in your circumstances).

- This is my claim for Housing Benefit, Council Tax Support, or both.
- I will tell the Revenues & Benefits Service if any of the details in any letter you send me are incorrect.
- The information I have given is true and complete.
- You can check any information on this form. This includes sending a certificate of earnings direct to my employer if necessary.
- I am not claiming Housing Benefit or Council Tax Support for any other address.
- The address that I am claiming Housing Benefit or Council Tax Support for is the property where I normally live.
- I understand that you will use my personal data in accordance with the requirements and safeguards within Data Protection legislation and that full details are available at www.adur-worthing.gov.uk/benefits/privacy-notice.
- I understand that you may contact government departments (for example, the Department for Work and Pensions or the Home Office) or other councils to check the information I have given on the form and to get other information.
- I understand that if I do not provide a National Insurance number, my claim will not normally be dealt with.
- If there are any changes in my circumstances, I will write to the Benefit Service straight away so that you can work out my benefit again. I know that if I do not, and I get too much benefit or discount, you can ask me to pay it back and may prosecute me.

Signature of person claiming:

Date:

Partner's signature:

Date:

If the form has been filled in by someone other than the person claiming

Please tell us why you are filling in this form for someone else.

As far as possible, I have confirmed with the person claiming that the information I have written on this form is correct.

Name of the person who filled in the form:

Signature of person:

Date:

Relationship to the person claiming:

**Please return this form to the address given on the front page.
If you post it, you must pay the postage.**

Further information

Please use this section if you need more space to answer any questions or to tell us anything else you think we may need to know to process your claim.

Ethnic monitoring

We monitor the ethnic groups of those who apply for benefit to make sure we are meeting the needs of all our customers. It would be helpful if you could fill in the following (but you do not have to).

What is your ethnic group?

A White

British
Irish
Any other white background

☐ Indian
☐ Pakistani
☐ Bangladeshi
Any other Asian background

C Asian or British Asian

E Chinese or other

☐ ethnic group
☐ Chinese
☐ Any other
☐ Please state

B Mixed

White and Black Caribbean
White and Black African
White and Asian
Any other mixed background

D Black or black British

☐ Caribbean
☐ African
☐ Any other black background

Are you

☐ bisexual ☐ gay ☐
☐ heterosexual ☐ lesbian ☐
☐ transgender ☐
Other ☐
Please state

Sharing information with your landlord

We will not discuss your claim with your landlord unless we have your permission or the law says we must. However, sharing information with your landlord helps us to deal with your claim quickly and reduces the risk of you falling behind with your rent because of your claim being delayed. If you give us permission, we would be able to tell your landlord:

- whether or not you had claimed Housing Benefit and, if so, whether we have made a decision on your claim or not; and
- if we need more information to make a decision on your claim, and if so what information we need.

There may be other information about your claim that we need to check with your landlord (such as the date your tenancy started) before we can make a decision on your claim. If this is the case, we have to ask your landlord, even if you have not given us permission to discuss your claim with them. Unless you have given us permission by signing this form, we will not discuss anything else with your landlord.

Once we have worked out your benefit, we will not give your landlord any detailed information about your personal, household or financial circumstances (for example, how much income you have).

If you do not give us permission to discuss your claim with your landlord, it will not affect your claim. If you give us permission but then change your mind, you can withdraw it. Just contact us and let us know.

If you want to give us permission to discuss your claim with your landlord, please sign below.

I give Adur District Council & Worthing Borough Council permission to share information about the progress of my Housing Benefit claim with my landlord or their representative.

Signature:

Date:

Address:

Please read these important notes before you fill in the form. They will help you to give us the right information so that we can pay your benefit quickly.

Students

Most students are not entitled to benefit, but the rules are quite complicated and there are some exceptions. The following groups of students can claim:

- Those getting Income Support
- Those on part-time courses
- Those over 60
- Those responsible for a child.

This is not a full list of students who can claim. If you are not sure whether you can claim, please phone us or send in this form.

Cash, savings and investments

If the total value of your cash, savings and investments is more than £16,000, you cannot usually claim Housing Benefit or Council Tax Support unless you or your partner are receiving a Pension Credit (Guaranteed Credit).

Your rent

Your landlord should have made it clear to you whether or not any services are included within your rent, and you should give as much detail here as you can. If you cannot give us exact figures, we will make standard deductions that are set by the Government, or we may have to contact your landlord.

Paying your benefit

We usually pay Housing Benefit from the Monday after we receive your form. If you are a new tenant, we can pay from the start date of your tenancy, but only if we receive your claim form by the Sunday after your tenancy starts.

We normally pay Housing Benefit for private tenants every fortnight for the previous fortnight. If we pay the benefit direct to your landlord, we will pay it every four weeks for the past four weeks.

We take the amount of your Council Tax Support from your Council Tax bill.

Backdating

We may be able to backdate your claim if you have a good reason for not claiming earlier. You will need to write to us separately if you think your benefit should be backdated. We can only backdate for a maximum of 1 month from the date you apply for the backdating.

Appeals

If you disagree with any decision that we make about your benefit you have the right to appeal. You should put your appeal in writing, and send it to us within one month of the date of the letter telling you your decision. In your letter, explain why you think we have got it wrong. Give as much detail as you can. If we do not accept your appeal, your case will automatically be referred to the Independent Tribunal Service. Contact us if you need more information on the appeals process. There are strict time limits on making appeals.

Second Adult Rebate

Even if you cannot get Council Tax Support, you could still get Second Adult Rebate if:

- you are the only person in your home responsible for paying Council Tax.
- you live with someone else who is not your partner, who is on a low income, and who does not pay you rent.

If you want to claim Second Adult Rebate, you only need to fill in sections **1** and **3**, provide proof, and sign the declaration.

Change of circumstances

We use the information you give the Benefit Section in this form to assess your claim for benefit. You must immediately tell us in writing if any of the information you give changes and provide original proof of this change. At the back of this form is a list of some of the changes that you need to tell the Benefit Section about.

If you delay telling us about a change in your circumstances, we may pay you too much benefit which you would have to pay back, or you could be missing out on extra benefit.

Visits

We may visit you at home to make sure your circumstances have not changed and that you are still getting the right amount of benefit. All of our officers carry photo ID cards. Please make sure you ask to see this before you let anyone into your home.

Why we need original documents

The Department for Work and Pensions tell us which documents we should ask for to support your claim. Providing the proof helps us to make sure you receive the benefits you are entitled to and that we work them out accurately. The types of document we can accept are listed on page 16.

Why we need so much detail

Do not be put off by the length of the form. We are sorry to ask so many questions, but we need you to answer in full so that we can be sure to pay you the right amount of benefit. For example, if you receive an allowance for a disability, it could mean that you can get more benefit. If you are having difficulty filling in the form, or sending us proof, and you need some help, phone us 01273 263444 if you live in Adur or 01903 221062 if you live in Worthing. We can probably help you over the phone or can arrange for an officer to see you at home.

Changes you must tell us about

We will assess your claim using the information you have given us. You must tell us straight away if there are any changes to your circumstances. Here are some examples of changes you must tell us about.

- ☐ You stop receiving Income Support, Jobseeker's Allowance or Employment Support Allowance
- ☐ Your Working Tax Credit or Child Tax Credit changes
- ☐ You move (even if you only move to a different room or flat within the same property)
- ☐ A child leaves school or leaves home
- ☐ You have a baby
- ☐ Your child starts to be cared for, or stops being cared for, by a registered childminder, nursery or playgroup
- ☐ Someone moves into or out of your home (including lodgers and subtenants)
- ☐ Your income, or the income of anyone living with you, goes up or down
- ☐ You or anyone living with you becomes a student, or starts up a Government Training Scheme
- ☐ You or anyone living with you goes into hospital or a nursing home, or goes into prison (even if this is on remand)
- ☐ You or anyone living with you gets a job, changes their job or becomes unemployed
- ☐ You or anyone living with you gets a second job
- ☐ You return to work after a period of illness and have been receiving benefit
- ☐ Your rent changes
- ☐ You or your partner will be away from home for two weeks or more, (where possible, tell us about this before you go)
- ☐ You receive a decision on your immigration status from the Home Office
- ☐ Someone starts to receive Carer's Allowance for looking after you
- ☐ You change the bank account we are paying your Housing Benefit into
- ☐ Any other change from what you have told us in this claim form

You must tell the Benefit Service about these changes in writing - a phone call is not enough. Do not rely on anyone else to give us the information, or pass a message on, not even Jobcentre Plus, The Pension Service or HM Revenue & Customs.

If you don't tell the Benefit Service about the changes, you may lose money you are entitled to, or we may pay you too much benefit which we can ask you to pay back.

If you're not sure whether or not you need to tell the Benefit Section about a change, phone the Customer Service Team on 01273 263444 if you live in Adur or 01903 221062 if you live in Worthing to check, or write to us with the details.



Certificate of Earnings

Housing Benefit and Council Tax Support

(Your employer should fill in this form)

PO Box 5000, Worthing
West Sussex, BN11 1JN
Phone: 01273 263444 (Adur residents)
Phone: 01903 221062 (Worthing residents)
Minicom: 01903 204500
E-mail: revsbens@adur-worthing.gov.uk

Employer's name:

Employer's address:

Your employee's name:

Your employee's address:

To the employer

Please help your employee by filling in this form, in black ink, showing their last two months' pay (if they are paid every month or every four weeks), their last five weeks' pay (if they are paid every week) or their last three payments (if they are paid every two weeks). If your employee has only just started work and has not yet been paid, please provide an estimate of their likely pay, income tax, National Insurance contributions and pension contributions.

What date did they start work?

/ /

/ /

What date did their employment end?

/ /

/ /

How often are they paid?

Every week ☐

Every two weeks ☐

☐

How are they paid?

By cash ☐

By cheque ☐

Directly into their bank account ☐

Every month ☐

Other ☐

Please state

Please state

What is their normal basic wage?

£

every

How many hours do they normally work each week?

every

Period covered		Tax period	Gross pay (see below)		Income tax		National Insurance contributions		Employee's pension contributions (£)	Take-home pay for this period (£)
From	To		This period (£)	Year to date (£)	This period (£)	Year to date (£)	This period (£)	Year to date (£)		
/ /	/ /									
/ /	/ /									
/ /	/ /									
/ /	/ /									
/ /	/ /									

Gross pay must include overtime, bonuses, commission, Statutory Sick Pay, Statutory Maternity Pay and so on.

I confirm that the details I have given are true and complete.

Employer's signature:

Phone number:

Business address:

Employer's official stamp

Please sign this form and stamp it with your official stamp, or confirm the details are correct in a letter on headed paper.

Landlord certificate (Your landlord should fill in this form).

Proof of rent

Landlord's name:

Landlord's address:

Landlord's phone number:

Tenant's name:

Tenant's address:

Is the tenant related to you? Yes ☐ No ☐

If 'Yes', how are they related?

Date the tenancy started: / / Date the tenant moved in: / /

The total rent you charge: £

How often is the rent due?

(For example, every week, fortnight, four weeks, month and so on)

Show which of the following are included in the rent and how much you charge

	Yes	No	Amount		Yes	No	Amount
Water rates	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Cleaning or	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Council Tax	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	lighting shared areas	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Heating	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Porter or	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Hot water	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	estate staff	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Cooking facilities	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Lift	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	General	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Laundry	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	counselling	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Cleaning	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	and support	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Personal care	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	Cleaning	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
				rooms	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
				and windows	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
				Emergency	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
				alarm			

Are meals included in the rent? Yes ☐ No ☐

Which ones? Breakfast ☐ Lunch ☐ Evening meal ☐

Give details of any other services included in the rent and the amount your tenant pays.

Is your tenant behind with their rent? Yes ☐ No ☐ If 'yes', by how much? £

Do you want us to consider paying Housing Benefit to you because of the overdue rent? Yes ☐ No ☐

What accommodation do you provide? (For example, a room, flat, two-bedroom house and so on.)

Declaration

I understand that if I give false information, I will be breaking the law. I may then be prosecuted and you may ask me to repay any overpaid Housing Benefit.

Landlord's signature: Date: / /

